04F1CAN432

## NEVADA FINANCIAL DISCLOSURE STATEMENT

(Attach additional sheets if necessary.)

FILE MAY 2 4 2004

NAME TODD ALLEN MAILING ADDRESS 4001 PENWOOD AVE. #23 CITY, STATE, ZIP LAS VEGAS. NV 89	LENGTH OF RESIDENCE IN NEVADA 9 YSS CRETARY OF STATE LENGTH OF RESIDENCE IN DISTRICT WHERE REGISTERED TO VOTE AS OF 4/10/2004					
TELEPHONE 702-892-3787			NRS 281.571(1)	(a)		
List all public offices for which this financial disclosure	e statement is r		all elected and	(no later than the 10th day after the last day to qualify as a	to fill une of an e appoin	INTMENT expired term elected or ted public fficer 30 days)
Public Office	Annual Compensation \$ 7800	Term or Date Appointed 4 YRS	each year) NRS 281.559(1)(b) 281.561(1)(b)	candidate) NRS 281.561(1)(a)	,	NRS 559(1)(a)
STATE SENATOR DISTRICT 11	\$ 7000	7 110			1	=
The state of the s	\$					
	\$		Ц	Ш		
List all general sources of income for you and member CPA FIRM	ers of your hou	sehold over 18 y	ears of age [N	RS 281.571, S	Subsection Self	ion 1(b)]: Household Member
List each creditor to whom you or a member of your or deed of trust on real property which is not require vehicle for personal use was retained by seller] [NRS	d to be listed b	elow, and (2) det	re [except (1) of for which a	debt secure security inte	d by m rest in Self	nortgage a motor Household Member
N/A						님
						<b> </b>

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List each business entity (i.e., orgifirm, business, trust joint venture involved as a trustee, beneficiary a class of stock or security representations 281.571, Subsection 1(f)]:	e, syndicate, corporation or as of a trust, director, officer, ow	ssociation) with which you wner in whole or in part, li	u or a member of you mited or general partr	ur hous ner, or l	sehold is nolder of
[MAS 201.511, Subsection 1(1)].				Self	Household
CAMPBELL ALLEN, LP				P	Member
CA HOLDINGS, INC					
				Ш	
List specific location and particuly your household has a legal or be state or an adjacent state [NRS 28]	neficial interest; (2) the fair m	er than personal residence arket value of which is \$2	e): (1) in which you o 2,500 or more; and (3	or a me	ember of ed in this
Spec	ific Location		Particular Use		
N/A					
List the identity of donor and val during the preceding taxable yea consanguinity or affinity; and (2) occasion if the donor does not ha [NRS 281.571, Subsection 1(e)]:	r [except (1) a gift received for a ceremonial gifts received for a	rom a person who is rela a birthday, wedding, ann	ited to you within the iversary, holiday or ot ive, or political action]	third d	remonial
N/A	Donor		<b></b> \$	7 dido 01	
***************************************			\$\$		
			\$		
	A. Marian Company of the Company of		<b>\$</b>		
THE INFORMATION I HAVE PR	OVIDED HEREIN IS ACCURA	ATE AND COMPLETE			
Date: 05/23/2004	Signature:	The			
Revised 8/28/2003					
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